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M 6636 CC/CSAP

**DECLARATION****Pag 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label

OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891	Steven J. Trzaska	36,296
Aaron E. Ettelman	42,516	Henry E. Millson, Jr.	18,980

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number  or label **23657** OR ☐ Fill in correspondence address below

Name	Steven J. Trzaska				
Address					
Address					
City		State		Zip	
Country		Telephone	610-278-4929	Fax	610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:** ☐ A petition has been filed for this unsigned inventor

Given Name	<b>Stephen</b>	Middle Initial	<b>F.</b>	Family Name	<b>Gross</b>	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	<b>Souderton</b>	State	<b>PA</b>	Country	<b>USA</b>	Citizenship	<b>USA</b>
Post Office Address	<b>152 Chester Court</b>						
Post Office Address							
City	<b>Souderton</b>	State	<b>PA</b>	Zip	<b>18964</b>	Country	<b>USA</b>
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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M 6636 CC/CSAP

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Martin	Middle Initial	J.	Family Name	Barabash	Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City	Jamesburg	State	NJ	Country	USA	Citizenship	USA	
Post Office Address	One Sawgrass Court							
Post Office Address								
City	Jamesburg	State	NJ	Zip	08831	Country	USA	
						Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	J. Frederick	Middle Initial		Family Name	Hessel	Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City	Doylestown	State	PA	Country	USA	Citizenship	USA	
Post Office Address	2097 Country Club Drive							
Post Office Address								
City	Doylestown	State	PA	Zip	18901	Country	USA	
						Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
						Applicant Authority		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
						Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto								